

\_\_\_\_\_  
Contractor Name\_\_\_\_\_  
DPW Contract No.

## Employee Affidavit

### Residents Preference Program

I certify that I maintain my permanent residence in the City of Milwaukee and that I vote, pay personal income tax, obtain my driver's license, etc. at \_\_\_\_\_, Milwaukee, WI \_\_\_\_\_  
(Address) (Zip Code)

**Residency status:**

To verify my resident status, attached please find the following (check *two*)

- \_\_\_\_\_ Copy of my voter's certification form.  
 \_\_\_\_\_ Copy of my last year's Form 1040.  
 \_\_\_\_\_ Copy of my current Wisconsin Driver's License or State ID.  
 \_\_\_\_\_ Copy of Other (i.e., Utility bill, Lease, etc.)

**AND****Unemployment status:**

I certify that I have been unemployed as follows: (Check those that apply)

- \_\_\_\_\_ I have worked less than 1,200 hours in the preceding 12 months.  
 \_\_\_\_\_ I have not worked in the preceding 15 days\*

**\*this selection only applies to new hires or inactive employees**

**OR****Underemployed status:**

\_\_\_\_\_ I certify that based on the attached chart (Income Eligibility Guidelines), I am underemployed.

**WORK HISTORY**

Construction Skills: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_,

Years of Experience: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_,

\_\_\_\_\_  
Print Name\_\_\_\_\_  
Sign Name\_\_\_\_\_  
Social Security Number\_\_\_\_\_  
Home Telephone Number

Subscribed and sworn to me this \_\_\_\_\_ day

Of \_\_\_\_\_, \_\_\_\_\_ A.D.

My Commission Expires \_\_\_\_\_.

\_\_\_\_\_  
Notary Public Milwaukee County

please return completed form and required attachments to:

Celeste Jantz | DPW Contracts Office | 841 N Broadway – Room 506 | Milwaukee, WI 53202 | [cjantz@milwaukee.gov](mailto:cjantz@milwaukee.gov)

## Income Eligibility Guidelines July 1, 2021 to June 30, 2022

Eligibility determination is based on household size and income.  
Total income must be at or below the amounts in this table.

Household Size	Yearly	Monthly	Twice per month	Every 2 weeks	Weekly
1	23,828	1,986	993	917	459
2	32,227	2,686	1,343	1,240	620
3	40,626	3,386	1,693	1,563	782
4	49,025	4,086	2,043	1,886	943
5	57,424	4,786	2,393	2,209	1,105
6	65,823	5,486	2,743	2,532	1,266
7	74,222	6,186	3,093	2,855	1,428
8	82,621	6,886	3,443	3,178	1,589
For Each Additional Household Member Add	8,399	700	350	324	162

Source: Wisconsin Department of Public Instruction